CARMLS AGENT INFORMATION FORM

- 1. Upon completion of joining your local Board of REALTOR please complete this form and bring by, fax, or email to CARMLS.
- 2. You will receive an email from our office once we have received approval from your Board and your information is entered into our system (usually 24-48 hours). Upon receipt of this email we recommend you call to schedule your <u>NEW AGENT TRAINING</u>. New Agents will not be active in PARAGON until they attend NEW AGENT TRAINING or a PARAGON TRAINING WAIVER has been received from your broker.
- 3. All new agents will incur a \$50.00 initial application fee and 2-3 months of MLS Dues(\$25/month) on their broker's next monthly bill depending on day of month you become active in CARMLS. Agents transferring from one company to another will be assessed a \$35.00 transfer fee.

You must have an **ARKANSAS REAL ESTATE LICENSE** AND be **a member of a local BOARD of REALTORS** to qualify for CARMLS membership.

PLEASE CHECK YOUR DESIGNATION

| NEW AGENT | | | | | | |
|---|---------------|-------|------------------|--------|------------------|--|
| | BRANCH BROKER | ΠE> | Executive broker | | | |
| DATE: | | | | | | |
| Primary Board Affiliation: | | | | | | |
| Have you ever been a REALTOR? | | □Yes | □ _{No} | If yes | yes, what state? | |
| MLS ID # (New Agents wo | AGENT NAME: | First | | MI | Last | |
| OFFICE ID# | | :: | | | | |
| Cell Phone: Other Phone: | | | | | | |
| Email: Web Page: | | | | | | |
| NRDS# This number is <u>REQUIRED</u> and available from your BOARD. | | | | | | |
| Transfer Informati | on: | | | | | |
| Transfer from Office (Old):OFFICE # | | | | CE # | | |
| Transfer to Office (New): | | | OFFICE# | | | |
| | | | | | | |

I understand I will be issued a CARMLS Paragon I.D. and Password that is specific to me. I will not share my I.D. and

Password with anyone and if found sharing, both my Broker and I will be subject to applicable fines and penalties up to

\$2500.00 each and possible MLS suspension as mandated by the CARMLS Board of Directors. INITIALS_

Please fax completed form to 501-224-3338, email to **vickidavie@carmls.com** or **drop off** at CARMLS - 201 Natural Resources Dr. Little Rock, AR 72205